#### STATE OF HAWAII

#### Accounting Manual

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### SECTION 864: U.S. SAVINGS BOND

#### Purpose:

The U.S. SAVINGS BOND (Report No. PRD462) is an interest-bearing certificate purchased from the Federal Government. The payroll system will automatically print the bonds when the purchase price of the bonds is fully paid.

#### Frequency:

The bonds are printed on the last working day of each month.

### Distribution:

The bonds are forwarded to Central Payroll for review and mailed to the owner of the bond.

# Organization of the Bond:

The sequence of the report is:

- 1. Bond denomination.
- 2. Employee (purchaser) name.

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# SECTION 864: U.S. SAVINGS BOND

ITEM		
NO.	DATA	DATA DESCRIPTION
1		The name and address of the bond owner. The social security number of the bond owner, if available, will appear above his name.
2		The beneficiary's name (indicated by P.O.D.) or the co-owner's name (indicated by OR) of the bond.
3	ISSUE DATE	The date the bond was issued. The date will always be the first day of the month in which the purchase price of the bond was paid in full.
4	<b>\</b>	The serial number of the bond.
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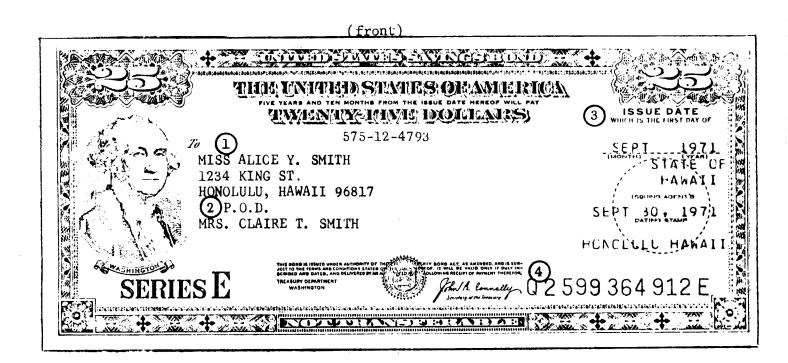
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# EXHIBIT A: SAMPLE REPORT KEYED TO EXPLANATION OF REPORT NO. PRIMA62



(back)

#### \$25-UNITED STATES SAVINGS BOND - SERIES E PAYMENT INSTRUCTIONS TO RECEIVE PAYMENT, THE RESPECTATED OWNER IN COUNTRY MAY PESSONALLY PRESENT HIS SOME ALE ANY TIME ATTER WIT MONING FRIM ISSUE OATE, TO ANY TANK ON OTHER INSTITUTION WHICH IS QUALIFIED AS A PAYME ACRESTED TO ANY TANK ON OTHER INSTITUTION WHICH IS QUALIFIED AS A PAYMENT AND ADDRESS OF THE PROPERTY OF THE PAYMENT, MAY RECEIVE CHILD FOR FROM IN THE ADDRESS OF THE PAYMENT, MAY RECEIVE CHILD FOR THE THE ADDRESS OF THE OTHER OF THE PAYMENT OF THE OTHER OF THE PAYMENT OF THE OTHER OTHER OF THE OTHER TABLE OF PAYMENT INSTRUCTIONS REQUEST FOR PAYMENT REDEMPTION VALUES I AM THE OWNER OF THIS BOND, AND HEREBY REQUEST PAYMENT. I DO NOT HOLD UNITED STATES SAYINGS BONDS OF SERIES E ORIGINALLY ISSUED TO ME IN EXCESS OF THE AMOUNT FIXED BY REGULATION. DURING EACH SUCCESSIVE PERIOD AFTER ISSUE DATE ISSUE PRICE ......\$18.75 SIGN IN INK IN PREBENCE OF PAYING AGENT OR CERTIFYING OFFICER FIRST 1/2 YEAR.....\$18.75 1/2 TO 1 YEAR.....19.05 1 TO 1/2 YEARS....19.51 INUMBERI MAIL ADDRESS 1 1/2 TO 2 YEARS.....19.95 TERMS AND CONDITIONS THIS BOND IS ISSUED PURSUANT TO TREASURY DEPARTMENT CIRCULAR NO. 573.EIGHER REVISION, AS AMEDID AND ISSUBJECT TO THE TERMS AND CONDITIONS THE REFORM THE GENERAL PROPERTY OF PARTMENT CHECKER AND THE GROWNING REGULATIONS AS FULLY AS IS BEREIN SET FORTH. THIS BODD, MATURES FIVE YEARS AND TEN MONHIS FROM ISSUE DATE AND MAY RE REOLEMED AT CURRENT RECOMPTION VALUES HEREON. AT THE OPTION OF THE GROWNER SAMY THE APPLICABLE REGULATION AND SURFINDER OF THE HOND WITH THE REQUEST FOR PAYMENT DULY SIGNED OR FACE. BY IN ACC HOADING WITH THE REGUEST FOR PAYMENT DULY SIGNED OR FACE. BY IN ACC HOADING WITH THE REGUEST FOR PAYMENT DULY SIGNED OR FACE. BY IN ACC HOADING WITH THE REGUEST FOR PAYMENT DULY SIGNED ON FACE. BY IN ACC HOADING WITH THE REGUEST OF THE REGUEST OF THE REGUEST OF THE STANDING ON THE REGUEST FOR PAYMENT DULY SIGNED OF THE DISABILITY OR DEATH OF THE GOOD WITH IN CASE OF THE DISABILITY OR DEATH OF THE THE GOOD WITH THE REGUEST OWNER. IN CASE OF THE DISABILITY OR DEATH OF THE THE GOOD WITH THE REGUEST OF THE MADE OF THE REGULATIONS, INSTRUCTIONS SHOULD BE REQUESTED IN THE REGULATIONS, INSTRUCTIONS SHOULD BE RECORDED TO THE REGULATIONS. THE REGUEST FOR PAYMENT IS EXCELLED IN THE RESIDENCE ON MAY NOLD DEPARTMENT OF A FEGURAL RESERVE BANK UP BRANCH BEFORE THE REGUEST FOR PAYMENT IS EXCELLED IN THE REGUEST ON MAY NOLD DIVIDED STATES SAVINGS BONDS OF SERIES E ACQUIRED ON DRIGGINAL ISSUE IN ANY ONCE CALENDAR YEAR IN EXCESS OF THE TERMS AND CONDITIONS ICITYI IZIP COOK 2 TO 2 1/2 YEARS.....20.40 (STATE) I CERTIFY THAT THE ABOVE NAMED PERSON, WHOSE IDENTITY IS WELL 2 10 3 YEAR5.....20.88 3 TO 3 1/2 YEARS.....21.39 KNOWN OR PROYED TO ME, SIGNED THE ABOVE REDUEST IN MY PRESENCE, ACKNOWLEDGING THE SAME TO BE HIS FREE ACT AND DEED. 3 1/2 TO 4 YEARS ..... 21.93 4 TO 4 1/2 YEARS......22.53 WITNESS MY HAND AND OFFICIAL DESIGNATION THIS .. 4 1/2 TO 5 YEARS.....23.16 5 TO 5 1/2 YEARS.....23.82 5 1/2 YEARS TO 5 YEARS AND TEN OFFICIAL SEAL MONTHS ......24.51 (SIGNATURE OF OFFICER) OR 5 YEARS AND DATING STAMP TEN MONTHS FROM IDEBIGNATION OF OFFICER ISSUE DATE .......... 25.73 HOINTEREATION EMOLIATION